SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 26 OF 130 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) SCALISE LEADERSHIP FUND	ne name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) WILLIAM DAVIS Mailing Address 900 RIVERCREST DR City FORT WORTH FEC ID number of contributing federal political committee. Name of Employer DAVOIL INC Receipt For: Primary General Other (specify)	State Zip Code TX 76107-1539 C Occupation PRESIDENT Aggregate Year-to-Date ▼ 2500.00	Date of Receipt M
Full Name (Last, First, Middle Initial) JOHN KLEINHEINZ Mailing Address 301 COMMERCE ST #1800 City FORT WORTH FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary General Other (specify)	State Zip Code TX 76102-4109 C Occupation SELF Aggregate Year-to-Date ▼ 5000.00	Date of Receipt Mark
Full Name (Last, First, Middle Initial) MARY GREALY Mailing Address 312 SEVERN AVE E-314 City ANNAPOLIS FEC ID number of contributing federal political committee. Name of Employer PRESIDENT Receipt For: Primary Other (specify) General	State Zip Code MD 21403-2532 C Occupation HEALTH LEADERSHIP COUNCIL Aggregate Year-to-Date ▼ 500.00	Date of Receipt 06 11 2015 Transaction ID : SA11.584 Amount of Each Receipt this Period 500.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)	>	8000.00